

Linda McCulloch, Superintendent Office of Public Instruction Accounting Division PO Box 202501 Helena, Montana 59620-2501

Fiscal Closeout Report for State and Federal Grant Programs

DIRECTIONS—ONLY A PRIME APPLICANT SHOULD COMPLETE THIS FORM. USE A SEPARATE FORM FOR EACH PROJECT.

Complete and sign, then send the original of this form to the Office of Public Instruction, Accounting Department. Retain a copy for your files. SEF INSTRUCTIONS ON THE BACK.

your files. SEE IN	STRUCTIONS ON THE BA	CK.				
Prime Applicant:		County:		☐ Elen	n Legal Entity	
				H.S.		
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				Othe	, ,	
					2 Logar Emity:	
Fill in the project name and number (from the budget page).						
State/Federal Project Name:				Project Number:		
				PN:		
Project Period: From: To:				-		
	(mo / day / yr)		(mo / day / yr)			
			(a)	(b)	(c)	(d)
E	xpenditures		Elementary	High School	Total Project	Matching Funds
(SEE INSTRUCTIONS ON THE BACK.)			Expenditures	Expenditures	Expenditures [(a) + (b)]	(If required by
			(Title I only)	(Title I only)	(All programs)	program)
Salaries and Benefit	ts					
Objects 1xx, 2xx						
Operating Expenses	3					
Objects 3xx, 4xx, 5x	x, 6xx, 8xx					
3. SUB-TOTAL DIREC						
(Sum of lines 1 + 2)						
4. Indirect Cost Recove	ery%					
Object 62xx-940						
5. Equipment (\$5,000 or more per unit) Object 7xx						
6. Transferred to Other	 r Districts					
Object 6200-930 (IDEA only)						
7. TOTAL Expenditures						
(Sum of lines 3, 4, 5	5 + 6)					
8. TOTAL Funds Received 10. Due to OPI (attach refund)						
O TOTAL Funda Fyrandad			•	(line 8 > line 9) OR		
7. TOTAL Funds Expended 11. Due from OPI (line 7. MUST_line 0)						
(line 7 MUST = line 9) (line 8 < line 9)						
Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all expenditures are for the purposes set forth in the award documents.						
and purposed det forum	tile award decamente.					
Authorized						
Representative					_	
Representative	Signature:		Ph	one:	Date:	
Clark/Pusiness						
Clerk/Business	Signature:		Dh	one:	Date:	
Official	Signature:		PII	OH6	Date	
	Approved		Final			
FOR OPI						
USE ONLY	Signature:OPI Prog	ıram Acco	untant		Date:	
	OFI FIOU	nam Acco	unani			

Instructions

Please type or print legibly. The following general instructions explain how to complete lines 1 through 11 of the Expenditures section. Submit the Fiscal Closeout Report for a July-June project to OPI **no later than August 10**. Submit the Fiscal Closeout Report for a July-September project to OPI **no later than November 10**. Reimbursements requested on a late fiscal closeout report <u>will not be paid</u>.

<u>Columns (a) and (b):</u> Title I requires a breakdown of elementary and high school expenditures. **Use these columns to report Title I projects expenditures only.**

<u>Column (c):</u> All programs require expenditures to be listed in this column. For Title I, combine amounts from columns (a) and (b). For programs other than Title I, list the total project expenditures here.

<u>Column (d):</u> ABE and Gifted and Talented programs require a local match. Report matching expenditures in this column.

Lines

- 1, 2, and 3. Self-explanatory.
- Line 4. Use the approved indirect cost rate of the prime applicant in effect the first day of the project period. The amount entered on this line cannot exceed the approved percentage rate times the amount on line 3. The indirect cost rate applied to a Carl Perkins grant may not exceed 5 percent.
- Line 5. Enter the amount of expenditures for purchased or leased equipment for which prior OPI budget approval was given.
- Line 6. Enter the dollar amount of IDEA funds that you, as a prime applicant, transferred to other school districts.
- Line 7. Self-explanatory.
- Line 8. Enter the total amount of cash advances/reimbursements received from OPI during the project period.
- Line 9. Enter the amount from line 7.
- Line 10. Use line 10 if total funds received exceed total funds expended. If the dollar amount entered on line 10 is less than \$10, the recipient is NOT REQUIRED to send a refund to OPI.
- Line 11. Use line 11 if total funds expended exceed total funds received. OPI will automatically send the balance owed if line 8 is less than line 9.